PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

19667569

CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
FC)R	NUMB	ER FILED	NUMBER NUMBER	EXTRA	RATE	FEE	1	RATE	FEE
ВА	SIC FEE			<u>-</u>			345.00	OR		690.00
TO	TAL CLAIMS	8	minus	s 20= · 87	64	X\$ 9=		OR	X\$18=	1152
INDEPENDENT CLAIMS 32 minus 3 = · 元 文 之 小								1 1	X78=	2169
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT		X	X39=		OR		200
* f	the difference	ın column 1 is	less than	+130=	<u> </u>	OR	+260=	260		
• •					701 4 11111 2	TOTAL		OR	TOTAL	4364
	C	(Column 1)	AMENUE	(Column 2)	(Column 3)	SMALL	ENTITY	OR	OTHER SMALL	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**	=	X\$ 9=	, <u>, , , , , , , , , , , , , , , , , , </u>	OR	X\$18=	
	Independent	•	Minus	***	=	X39=		OR	X78≃	
_	FIRST PRESE	NTATION OF M	ULTIPLE D	EPENDENT CLAIM		120			. 260	
						+130= TOTAL		OR	+260= TOTAL	
						ADDIT FEE		OR,	ADDIT FEE	
		(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)	-				
ENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	••	=	X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***	=	X39=		OR	X78=	
	FIRST PRESE	'NTATION OF M	IHITIPI E D	EDENIDENT OF AIM						
	•		OLITICE D	EPENDENI CLAIV		120-			260-	
1	-			EPENDENT CLAIV		+130=		OR	+260=	
						+130= TOTAL ADDIT FEE		OR	+260= TOTAL ADDIT FEE	
		(Column 1)		(Column 2)	(Column 3)	TOTAL		OR	TOTAL	
						TOTAL	ADDI- TIONAL FEE	OR	TOTAL	ADDI- TIONAL FEE
	Total	(Column 1) CLA MS REMAIN NG AFTER	Minus	(Column 2) H GHEST NUMBER PREV OUSLY	(Column 3)	TOTAL ADDIT FEE	TIONAL	OR OR	TÓTÁL ADDIT FEE	TIONAL
	Total Independent	(Column 1) CLA MS REMAIN NG AFTER		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE X\$ 9=	TIONAL	OR OR	TOTAL ADDIT FEE RATE X\$18=	TIONAL
	Independent	(Column 1) CLA MS REMAIN NG AFTER AMENDMENT	Minus Minus	(Column 2) H GHÉST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	ADEIT FEE	TIONAL	OR OR	TÓTÁL ADDIT FEE RATE	TIONAL
AMENDMENT C	Independent F'RST PRESE	(Column 1) CLA MS REMAIN NG AFTER AMENDMENT .	Minus Minus	(Column 2) H GHÉST NUMBER PREVIOUSLY PAID FOR EPENDENT CLAIN	(Column 3) PRESENT EXTRA	RATE X\$ 9=	TIONAL	OR OR	TOTAL ADDIT FEE RATE X\$18=	TIONAL
AMENDMENT	Independent F'RST PRESE	(Column 1) CLA MS REMAIN NG AFTER AMENDMENT NTATION OF M	Minus Minus ULT.PLE D	(Column 2) H GHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE X\$ 9= X39=	TIONAL	OR OR OR	TOTALIADEIT FEE	TIONAL

This Iron is for ENTERNAL PTO USE ONLY THROWS NOT get mailed to the applicant.

NOTICE OF FILING CLAIM FEE (S) DUT

	5 .	Torsi Fa		
		77	57	1026 1026 360 130
<u> </u>	: 422 . j	4540		
រតី…ភន្តី««ប្រឹម ាក ្ត	:::			- -
LANCE DUE	= 5	4590j		•

COAM CLEENING COM 1200